

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	SP03-034	Total Pages	2
First Named Inventor or Application Identifier: HORSFALL et al.			
Title : LAMP REFLECTOR, GLASS, GLASS-CERAMIC MATERIALS AND PROCESS FOR MAKING THE SAME			
Express Mail Label No.	EV 327189820 US		

CERTIFICATE OF EXPRESS MAIL UNDER 37 CFR 1.10:

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is Addressed to Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on 3-18-04

(Date)

Signature Colleen E. Doherty
Colleen E. Doherty

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ADDRESS TO:
Mail Stop Patent Application
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

22581 U.S.P.T.O.
10/804482
981864

1. <input checked="" type="checkbox"/> * Fee Transmittal Form (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
- Descriptive title of the Invention		a. <input type="checkbox"/> Computer Readable Copy
- Cross References to Related Applications		b. <input type="checkbox"/> Paper Copy (identical to computer copy)
- Statement Regarding Fed sponsored R&D		c. <input type="checkbox"/> Statement verifying identity of above copies
- Reference to Microfiche Appendix		
- Background of the Invention		
- Brief Summary of the Invention		
- Brief Description of the Drawings (if filed)		
- Detailed Description		
- Claim(s)		
- Abstract of the Disclosure		
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113)	(Total Sheets <u>12</u>)	7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. Oath or Declaration	(Total Pages <u>2</u>)	8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)
a. <input checked="" type="checkbox"/> Executed (original or copy)	9. <input type="checkbox"/> English Translation Document (if applicable)	
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)	10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> Preliminary Amendment	
12. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)		
13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	14. <input type="checkbox"/> Other:	

ACCOMPANYING APPLICATION PARTS

7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	15. <input type="checkbox"/> Other:
8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)	<input checked="" type="checkbox"/> Copies of IDS Citations
9. <input type="checkbox"/> English Translation Document (if applicable)	
10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	
11. <input type="checkbox"/> Preliminary Amendment	
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)	
13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
14. <input type="checkbox"/> Other:	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional. Continuation-in-part (CIP) of prior application No

Prior application information: Examiner:

Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 22928 or Correspondence address below

NAME	Corning Incorporated				
ADDRESS	IP Dept., SP-TI-3-1				
CITY	Corning	STATE	NY	ZIP CODE	14831
COUNTRY	USA	TELEPHONE	607-248-1253	FAX	(607) 974-3848
Name (Print/Type)	<u>Siwen Chen</u>		Registration No. (Attorney/Agent)		
Signature	<u>Colleen E. Doherty</u>		Date	<u>March 18, 2004</u>	

031804
02570

U.S.PTO

FEE TRANSMITTAL for FY 2003

TOTAL AMOUNT OF PAYMENT (\$) **770.00**
METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **03-3325**

Deposit Account Name **Corning Incorporated**

Charge Any Additional Fees Required
Under 37 C.F.R. §§ 1.16 and 1.17

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION
1. BASIC FILING FEE

Large Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1001	770	Utility filing fee	<u>770.00</u>
	1002	340	Design filing fee	
	1003	530	Plant filing fee	
	1004	770	Reissue filing fee	
	1005	160	Provisional filing fee	

SUBTOTAL (1) **(\$)** **770.00**
2. EXTRA CLAIM FEES

Extra Fee from
Claims below Fee Paid
Total Claims $16 - 20^{**} = 0 \times 18 = 00.00$

Independent Claims $3 - 3^{**} = 0 \times 86 = 00.00$

Multiple Dependent $0 = 0.00$

**or number previously paid, if greater; For Reissues, see below

Large Entity	Fee Code	Fee (\$)	Fee Description
	1202	18	Claims in excess of 20
	1201	86	Independent claims in excess of 3
	1203	290	Multiple dependent claim, if not paid0
	1204	86	** Reissue independent claims over original patent
	1205	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$)** **00.00**

Complete if Known	
Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	HORSFALL, et al.
Examiner Name	To Be Assigned
Group / Art Unit	To Be Assigned
Attorney Docket Number	SP03-034

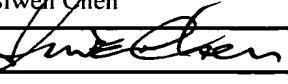
FEE CALCULATION (continued)
3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1051	130	Surcharge - late filing fee or oath	
	1052	50	Surcharge - late provisional filing fee or cover sheet	
	1053	130	Non-English specification	
	1812	2,520	For filing a request for reexamination	
	1804	920*	Requesting publication of SIR prior to Examiner action	
	1805	1,840	Requesting publication of SIR after Examiner action	
	1251	110	Extension for reply within first month	
	1252	420	Extension for reply within second month	
	1253	950	Extension for reply within third month	
	1254	1,480	Extension for reply within fourth month	
	1255	2,010	Extension for reply within fifth month	
	1401	330	Notice of Appeal	
	1402	330	Filing a brief in support of an appeal	
	1403	290	Request for oral hearing	
	1451	1,510	Petition to institute a public use proceeding	
	1452	110	Petition to revive - unavoidable	
	1453	1,330	Petition to revive - unintentional	
	1501	1,330	Utility issue fee (or reissue)	
	1502	480	Design issue fee	
	1503	640	Plant issue fee	
	1460	130	Petitions to the Commissioner	
	1807	50	Petitions related to provisional applications	
	1806	180	Submission of Information Disclosure Stmt	
	8021	40	Recording each patent assignment per property (times number of properties)	
	1809	770	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	
	1810	770	For each additional invention to be examined (37 C.F.R. § 1.129(b))	
	1801	770	Request for Continued Examination (RCE)	
	1802	900	Request for expedited examination of a design application	

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$)**

Completed (if applicable)

Name (Print/Type)	Siwen Chen	Registration No. (Attorney/Agent)	
Signature		Date	